



00000 00000 00000 00000
Mailed From 45202
US POSTAGE

2007 0710 0000 0134 2621
CERTIFIED MAIL

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

KENNETH LAWSON
1001 1/2 St. Suite 2
CINCINNATI, OH 45202

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type

Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery (Extra Fee) Yes

2. Article Number
(Transfer from service label)

2007 0710 0000 0134 2621

102595-02-M-1540

PS Form 3811, February 2004

Domestic Return Receipt

A
 C
 S
INSUFFICIENT ADDRESS
ATTEMPTED NOT KNOWN OTHER
 NO SUCH NUMBER/STREET
NOT DELIVERABLE AS ADDRESSED
- UNABLE TO FORWARD

RTS

RETURN TO SENDER